

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number 671096.404USPC
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		
Application Number 10/541,896	Filed March 30, 2006	
For ASSESSMENT OF COGNITIVE IMPAIRMENT		
Art Unit 3736	Examiner Brian Scott Szmal	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	<u>\$130</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$_____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$_____

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number 19-1090.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration No. 43,058
- attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34. _____.

/Stephen J. Rosenman/

March 1, 2010

Signature

Date

Stephen J. Rosenman, Ph.D.

206-622-4900

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required.